



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

Hermann P.T. AMMON et al.

Application No.: 09/011,977

Filing Date: June 15, 1998

Group Art Unit: 1623

Examiner: Howard V. Owens, Jr.

Confirmation No.: 1580

Title: USE OF BOSWELLIC ACID AND ITS DERIVATIVES FOR INHIBITING NORMAL AND INCREASED LEUCOCYTIC ELASTASE OR PLASMIN ACTIVITY

AMENDMENT/REPLY TRANSMITTAL LETTER

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Enclosed is a reply for the above-identified patent application.

☒ A Petition for Extension of Time is also enclosed.

☐ Terminal Disclaimer(s) and the ☐ \$55.00 (2814) ☐ \$110.00 (1814) fee per Disclaimer due under 37 C.F.R. § 1.20(d) are also enclosed.

☒ Also enclosed is/are an Information Disclosure Statement with copies of references, and an Applicant Initiated Interview Request Form.

☐ Small entity status is hereby claimed.

☐ Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the ☐ \$385.00 (2801) ☐ \$770.00 (1801) fee due under 37 C.F.R. § 1.17(e).

☐ Applicant(s) requests that any previously unentered after final amendments not be entered. Continued examination is requested based on the enclosed documents identified above.

☐ Applicant(s) previously submitted _____

_____ on _____
for which continued examination is requested.

☐ Applicant(s) requests suspension of action by the Office until at least _____, which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.

☐ A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a) (1809/2809) is also enclosed.

- ☒ No additional claim fee is required.
- ☐ An additional claim fee is required, and is calculated as shown below.

AMENDED CLAIMS					
	No. of Claims	Highest No. of Claims Previously Paid For	Extra Claims	Rate	Additional Fee
Total Claims	27	MINUS 27 =	0	x \$18.00 (1202) =	\$ 0.00
Independent Claims	3	MINUS 3 =	0	x \$86.00 (1201) =	\$ 0.00
If Amendment adds multiple dependent claims, add \$290.00 (1203)					
Total Claim Amendment Fee					\$ 0.00
<input type="checkbox"/> Small Entity Status claimed - subtract 50% of Total Claim Amendment Fee					\$ 0.00
TOTAL ADDITIONAL CLAIM FEE DUE FOR THIS AMENDMENT					\$ 0.00

- ☐ A check in the amount of _____ is enclosed for the fee due.
- ☐ Charge _____ to Deposit Account No. 02-4800.

The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17, 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

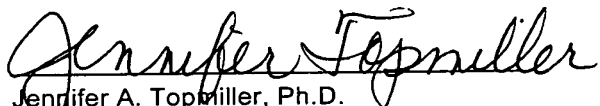
Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

P.O. Box 1404
Alexandria, Virginia 22313-1404
(703) 836-6620

Date: March 9, 2004

By


Jennifer A. Topmiller, Ph.D.
Registration No. 50,435



APPLICANT INITIATED INTERVIEW REQUEST FORM

Attorney Docket No. 015200-054

First Named Applicant: Hermann P.T. AMMON et al.

Application No.: 09/011,977

Examiner: Howard V. Owens, Jr.

Group Art Unit: 1623

Status of Application: _____

Tentative Participants: Jennifer Topmiller, Kathy Baumeister, Examiner Howard Owens, Examiner James Wilson

Proposed Date of Interview: April 1-15, 2004

Proposed Time: flexible

☐ AM
☐ PM

Type of Interview Requested: (1) ☐ Telephonic (2) ☒ Personal (3) ☐ Video Conference

Exhibit To Be Shown Or Demonstrated: ☐ Yes ☒ No

If yes, provide brief description: _____

ISSUES TO BE DISCUSSED

Issues (Rej., Obj., etc.)	Claims/ Fig. #s	Cited Documents	Discussed	Agreed	Not Agreed
(1) <u>112 rejections</u>	<u>All</u>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(2) <u>103 rejecton</u>	<u>All</u>	<u>Ammon et al.</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(3) _____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(4) _____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Continuation Sheet Attached

Brief Description of Arguments to be Presented:

This form should be completed by applicant and submitted to the examiner in advance of the interview (see MPEP 713.01). This applicaiton will not be delayed from issue because of applicant's failure to submit a written record of this interview. Therefore, applicant is advised to file a statement of the substance of this interview (37 CFR 1.133(b)) as soon as possible.

Jennifer Topmiller
Jennifer A. Topmiller, Ph.D.
Reg. No. 50,435

Examiner / SPE Signature



Patent
Attorney Docket No. 015200-054

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SECOND
INFORMATION DISCLOSURE STATEMENT
TRANSMITTAL LETTER

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Enclosed is a **SECOND** Information Disclosure Statement and accompanying form PTO-1449 for the above-identified patent application.

- ☐ No additional fee for submission of an IDS is required.
- ☒ The fee of \$180.00 (1806) as set forth in 37 C.F.R. § 1.17(p) is also enclosed.
- ☐ A statement under 37 C.F.R. § 1.97(e) is also enclosed.
- ☐ A statement under 37 C.F.R. § 1.97(e), and the fee of \$180.00 (1806) as set forth in 37 C.F.R. § 1.17(p) are also enclosed.
- ☐ Charge _____ to Deposit Account No. 02-4800 for the fee due.
- ☒ A check in the amount of \$ 180.00 is enclosed for the fee due.

The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17 and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.


Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

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